Virginia Department of Taxation

Substitute Forms Specifications

Form 760PMT – Income Tax Payment Voucher – Individual

Special Notes
- Document ID – 761
- Barcode – No
- Rounding – Yes; the length of 15 for numeric fields includes the 2 places for the ".00" rounded cents.
- Due Date – May 1st
- Neither the OCR Line nor the Account Number field may contain dashes or hyphens (-).
- Review the instructions provided via the main Forms page when computations are required and/or when amount/numbers must be transferred to/from another form. The 760PMT supports Forms 760, 760PY and 763.

Use the Check Digit Calculator to determine the correct digit used in the applicable section of the OCR Line.

OCR Table

Example – XXXXXXXXXD 761VVVV 1YY00D

Section	Length	Position	Format / Data	Description / Details
SSN	9	Col. 6, Row 52	Numeric	XXXXXXXXX = 9 digits
Check Digit (for SSN)	1		Numeric	D = Check Digit Calculator result
Blank Space	1		N/A	
Doc ID	3		Numeric	761
Vendor ID	4		Numeric	VVVV = 4 digits of the NACTP Vendor ID code
Blank Space	1		N/A	
Filing Period	5		Date (1YY00)	Ending date of the Filing Period 1 = Century, YY = Tax Year, 00 = Month
Check Digit (for Filing Period)	1		Numeric	D = Check Digit Calculator result

Form Table

Field	Length	Justified / Position	Format	Negative Allowed?	Description / Details
Your Social Security Number	9	Left	Numeric	N/A	9 digits Print for all filing statuses.
Spouse's Social Security Number	9	Left	Numeric	N/A	9 digits Print for filing statuses of: • (All forms) Married, Filing Joint • (760PY) Married, Filing Separate on Combined Return
OCR Line	29	Col. 6, Row 52	Numeric	N/A	See OCR Table for details
Name(s)	50	Left	Alphanumeric	N/A	Names of customer(s) Your Name – Print for all filing statuses Spouse's Name – Print for filing statuses of: • (All forms) Married, Filing Joint • (760PY) Married, Filing Separate on Combined Return
Address (Number & Street)	40	Left	Alphanumeric	N/A	Street address of customer(s)
City, State & ZIP Code	52	Left	Alphanumeric	N/A	City, State Abbreviation & ZIP Code of customer(s)
Amount of payment	15	Right Col. 60, Row 60	Numeric	No	Amount